

Docket: A-65353-8/RFT/RMS/RN 468268-18

## ED STATES PATENT AND TRADEMARK OFFICE

First Named

Inventor:

Stephen L. Mayo

Application No.:

09/837,886

Filing Date:

April 18, 2001

Protein Design

Title:

Apparatus and Method for Automated

**Examiner:** 

Group Art Unit: 1637

## SUPPLEMENTAL INFORMATION DISCLOSURE STATEMENT **UNDER 37 CFR 1.97(B)**

Commissioner for Patents Washington, D.C. 20231

I hereby certify that this document is being sent via First Class U.S. mail addressed to: Commissioner for Patents, Washington, D.C. 20231 on **23** this day of

Dear Sir:

Pursuant to 37 CFR 1.97(b), the references listed on the attached Form PTO-1449 (1 sheet) are brought to the attention of the Examiner for consideration in connection with the examination of the above-identified patent application. Copies of the identified references are enclosed as necessary.

## Payment of Fee Under 37 CFR 1.17(p)

The fee under 37 CFR 1.17(p), required for submission of an IDS under 37 CFR 1.97(d), is enclosed, as referenced in the attached Fee Transmittal Sheet.

10/02/2002 HVUONG1 00000009 09837886

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180.00 OP

Respectfully submitted,

DORSEY & WHITNEY LLP

Date:

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Renee M. Kosslak, Reg. No. 47,717 for

Robin M. Silva, Reg. No. 38,304

Filed under 37 C.F.R. § 1.34(a)

## **APPLICATION** OTAFEE TRANSMITTAL SHEET (FOR FY 2002)

PATENTAR

Complete if Known Application No. Filing Date April 18, 2001 First Named Inventor Stephen L. Mayo OCT 0 4 2002 Group Art Unit 1637 900

9/23

Date:

,3 0 <sub>2000</sub> <del>Q</del> !		Examiner Name Atty. Docket Number			Y. Kim TECH CENTER 1600, A-65353-8/RFT/RMK											
									METHOD OF PAYMENT (Check One)		•		FEE	CALCU	ILATION (Continued)	
									1. X The Commissioner is hereby authorized to charge indicate	ted fees	3. ADDI	IONAL	FEES			
and credit any over payments to: Deposit Account No.: 50-2319		Large E	ntity	Small	Entity	•										
Deposit Account Name: DORSEY & WHITNEY LLP		Fee Code	Fee (\$)	Fee Code		Fee Description	Fee pa									
☐ Charge any additional fee required under 37 C.F.R. 1.16 a	and 1.17	1010001000011		ne real mention of		Surcharge - late provisional filing	• **									
☐ Applicant claims small entity status (see 37 C.F.R. 1.27) 2. ☐ Check Enclosed		127	50	227	25	fee or cover sheet Surcharge – Late nonprovisional										
		105	130	205	65	filing fee or oath										
FEE CALCULATION		126	180	126	180	Submission of IDS	.180.00									
1. BASIC FILING FEE		581	40	81	40	Recording each patent assignment per property (times number of properties)										
Large Entity Small Entity			4. 1		2.42											
Fee Fee Fee Code (\$) Code (\$)		. 115	110	215	55	Extension for reply within first month										
114 160 214 80 Prov. Filing Fee	*	.116	400	216	200	Extension for reply within second month  Extension for reply within third										
		117	920	217	460	month Extension for reply within fourth										
		118 128	1,440 1,960	218 280	720 980	month Extension for reply within fifth										
106 330 206 165 ☐ Design Filing Fee	,	146	740	246	370	month Submission After Final 1.129										
108 740 ← 208 370 ☐ Reissue Filing Fee		119	320	219	160	Notice of Appeal										
Subtotal (1)		120	320	220	160	Filing a brief in support of an appeal										
2. EXTRA CLAIM FEES		121	280	221	140	Request for oral hearing										
Number Prior Extra <b>Fee from</b> Claims Below*	Fee Paid	148	110	248	55	Terminal Disclaimer Fee										
Total - 20 = x =		122	130	122	130	Petitions to the Commissioner										
Indep 3 = x =		123	50	123	50	Petitions related to provisional applications										
Multiple Dependent Claims x =		CARDING THE MI		Marian Company		Utility/Reissue Issue Fee										
Subtotal (2)		142	1,280 460	242 243	640 230	(including advance copies) Design Issue Fee (inc. advance										
•		179	740	279	370	copies) Request for Continued Examination (RCE)										
Large Entity Small Entity		195	300	195	300	Examination (RCE) Publication fee for early, voluntary, or normal publication										
Fee Fee Fee Fee Fee Scription (\$)		196	300	196	300	Publication fee for re-publication										
103 18 203 9 Claims in excess of 20 102 84 202 42 Independent claims in exc	cess of 3	140	110	240	55 640	Petition to Revive – unavoidable										
104 280 204 140 Multiple dependent Claim		OTHER I	1,280 FE (sp	241 ecify)	640	Petition to Revive – unintentional										
109 84 209 42 Reissue independent over original patent	Reissue independent claims over original patent			Subtotal (3)												
110 18 210. 9 Reissue claims in excess 20 and over original pater			130 - 4				4: 15									
Substitution to the state and the state of t		Total Ar	nount o	of Paymen	t:		180.0									
Submitted by:						<u> </u>										
Name: Renee M. Kosslak Reg. No.: 47,717	1	··· <del>-</del> ····		Telepho	ne: (41	5) 781-1989										

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Signature: